

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 DEC 19 AM 9:43

DOCUMENT # **F80570**

1. Corporation Name

PANKOR INVESTMENTS, INC.

W01-28010

2. Principal Office Address

10404 Bit and Spur Lane

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Potomac, MD

City & State

Zip

20854

Country

USA

Zip

Country

REINSTATEMENT 85-01

4. Date Incorporated or Qualified
To Do Business in Florida

5-8-82

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Chang Gun Lee

Street Address (P.O. Box Number is Not Acceptable)

9647 River Edge Court

Suite, Apt. #, Etc.

City

Longwood

State

FL

Zip Code

32779

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Chang Gun Lee

REGISTERED AGENT MUST SIGN

Date

1/25/01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Yeuw Sung Yim	14800 Hoover Street	Westminster, CA 92683
P	Si Woo Shin	11607 Masters Ln	Ellicott City, MD 21042
VP	Joo Soung Park	10404 Bit & Spur Lane	Potomac, MD 20854

1/25/01

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Joo S. Park (Vic President)

1/13/2001 (301) 983-3011